

REV. 10/03

For Other Than A Small Entity

03945 U.S. PTO
10/678403



Docket No. 293/053

Applicants : Paul J. Hindrichs et al.

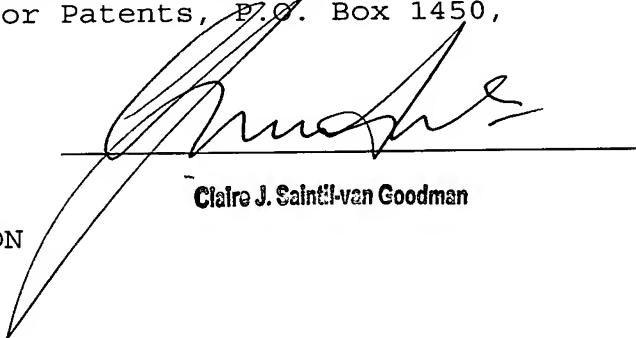
For : SELF-EXPANDING EXTERIOR CONNECTORS FOR
CREATING ANASTOMOSES TO SMALL-DIAMETER
VESSELS AND METHODS OF USE

EXPRESS MAIL CERTIFICATION

"Express Mail" mailing label number EV132187914US.

Date of Deposit October 3, 2003.

I hereby certify that this transmittal letter and the other papers and fees identified in this transmittal letter as being transmitted herewith are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and are addressed to Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Claire J. Saint-Jean Goodman

Mail Stop PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR
ORIGINAL PATENT APPLICATION

Sir:

Transmitted herewith for filing are the [X] specification; [X] claims; [X] abstract; [X] executed declaration and power of attorney; and [X] Print EFS data sheet, for the above-identified patent application.

Also transmitted herewith are:

[X] 33 sheets of:

[] Formal drawings.

[X] Informal drawings. Formal drawings will be filed during the pendency of this application.

[] Certified copy(ies) of application(s)

| | | |
|-----------|--------------|---------|
| (country) | (appln. no.) | (filed) |
| (country) | (appln. no.) | (filed) |
| (country) | (appln. no.) | (filed) |

from which priority is claimed.

- [X] This application claims the benefit of provisional patent application No. 60/416,485, filed on October 4, 2002.
- [X] An assignment of the invention to St. Jude Medical ATG, Inc..
- [X] A check in the amount of \$40.00 to cover the recording fee.
- [] Please charge \$40.00 to Deposit Account No. 06-1075 in payment of the recording fee. A duplicate copy of this transmittal letter is transmitted herewith.
- [X] A Print EFS Data Sheet.

The filing fee has been calculated as shown below:

| FOR | NUMBER FILED | | NUMBER EXTRA | | RATE | FEE | | | | |
|--------------------------------------|-----------------|---|-----------------|---|------|-----|------------------|-------|-----------|---------|
| BASIC FEE | | | | | | | \$ 770.00 | | | |
| TOTAL CLAIMS | 55 | - | 20* | = | 35 | X | \$ 18 | = | \$ 630.00 | |
| INDEPENDENT CLAIMS | 8 | - | 3** | = | 5 | X | \$ 86 | = | \$ 430.00 | |
| [] MULTIPLE DEPENDENT CLAIMS | | | | | | | + | \$290 | = | \$ 0.00 |

* If less than 20, insert 20.

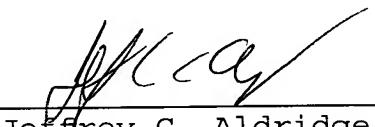
TOTAL = \$ 1830.00

A check in the amount of \$ 1830.00 in payment of the filing fee is transmitted herewith.

This application is being filed unaccompanied by a filing fee. The appropriate filing fee will be paid in response to a Notice to File Missing Parts, pursuant to 37 C.F.R. § 1.53(f).

The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

Please charge \$ _____ to Deposit Account No. 06-1075 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.



Jeffrey C. Aldridge
Registration No. 51,390
Agent for Applicants
FISH & NEAVE
Customer No. 1473
1251 Avenue of the Americas
New York, New York 10020-1105
Tel.: (212) 596-9000
Fax: (212) 596-9090